PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

29755045

| (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OR SMALL ENTITY | | |
|--|--|---|---------------------------------------|--------------------|---------------------------------|------------------|----------------------|-------------------|------------------------|---------|---------------------|------------------------|--|
| TOTAL CLAIMS | | | 3 | | | | ľ | RATE | FEE |) | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OB | BASIC FEE | | |
| TOTAL CHARGEABLE CLAIMS | | | 3 minus 20= | | • | | } | V0.0 | | | | | |
| | | | (111100 20 | | | | - | X\$ 9= | | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | 3 minus 3 = | | | | | X40= | | OR | X80= | | |
| ML | LTIPLE DEPEN | DENT CLAIM PI | RESENT | | | | | +135= | | OR | +270= | | |
| * If | the difference | in column 1 is | less than zero, enter "0" in column 2 | | | | ال | TOTAL | | OR | TOTAL | 710. | |
| | C | LAIMS AS A | MENDED - PART II | | | | | | | | OTHER THAN | | |
| | Lavelous International Visit | (Column 1) | (Colum | | | (Column 3) | 1 (= | SMALL | | OR | SMALL | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| AME | Independent | | Minus | *** CNDEN | T OLAINA | = | | X40= | ll À | OR | X80= | | |
| <u></u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | | |
| TOTAL ADDIT. FEE | | | | | | | | | - | OR | TOTAL ADDIT, FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIG NUM PREV | HEST MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| ME | Independent | • | Minus | *** | | = | | X40= | | OR | X80= | | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPEN | | | ENDEN | IT CLAIM | |] | | | | 070 | | |
| | | | | | | | | +135= | | OR | +270= | | |
| | TOTAL ADDIT. FEE | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| | | (Column 1) | | | umn 2) | (Column 3) |) - 31 | | | _ | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUI PREV | HEST MBER HOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| RE | Independent | • | Minus | *** | | = | | X40= | | | X80= | | |
| | FIRST PRESE | ENTATION OF M | PENDEN | IT CLAIM | | ▍▐ | | | OR | | | | |
| | If the entering and | | lho onlaria estr | mn 0 | ita "0" in | olumo 3 | | +135= | | OR | +270= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | | | |
| " | | umber Previously F mber Previously Pa | | | | | er foi | ınd in the an | propriate bo | x in co | olumn 1. | | |